APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

MAR 16 PH 12:30

NOTE: This form must be on file with the qualifying officer before opening the campaign account.	OFFICE USE ONLY				
1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change:	Treasurer/Deputy 🛛 Depository 🔲 Office 🔲 Party				
Name of Candidate (in this order: First, Middle, Last) SHLOMO DANZINGER	3. Address (include post office box or street, city, state, zip code) 9000 Harding Ave				
4. Telephone 5. E-mail address	Surfside FL 33154				
(305) 306-0445 shlomoforsurfside@gmail.	cor				
Office sought (include district, circuit, group number) Mayor	7. If a candidate for a <u>nonpartisan</u> office, check if applicable: My intent is to run as a Write-In candidate.				
8. If a candidate for a <u>partisan</u> office, check block and fi	Il in name of party as applicable: My intent is to run as a				
Write-In No Party Affiliation	Party candidate.				
9. I have appointed the following person to act as my	Campaign Treasurer Deputy Treasurer				
10. Name of Treasurer or Deputy Treasurer Shlomo Danzinger					
11. Mailing Address 12. Telephone					
9000 Harding Ave	(305) 306-0445				
13. City 14. County 15. S	tate 16. Zip Code 17. E-mail address				
Surfside Miami-Dade FL	33154 shlomoforsurfside@gmail.com				
18. I have designated the following bank as my	Primary Depository Secondary Depository				
19. Name of Bank	20. Address				
21. City 22. County	23. State 24. Zip Code				
	HE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND RY AND THAT THE FACTS STATED IN IT ARE TRUE.				
25. Date	26. Signature of Candidate				
03/16/2023	X Mention				
27. Treasurer's Acceptance of Appointmen	nt (fill in the blanks and check the appropriate block)				
I, SHLOMO DANZINGER	, do hereby accept the appointment				
(Please Print or Type Name)					
designated above as: Campaign Treasure	er Deputy Treasurer.				
03/16/2023 X	Shafin				
Date	Signature of Campaign Treasurer or Deputy Treasurer				

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)
(Please print or type)

OFFICE USE ONLY

MAR 16 PM12:30

SHLOMO DANZINGER						
candidate for the office of MAYOR ;						
have been provided access to read and understand the requirements of						
Chapter 106, Florida Statutes.						
X 03/16/2023 Signature of Candidate Date						

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying



MAR 16 PM12:30

officer before opening the			illying						I	OF	FICE	USE	ONLY
1. CHECK APPROPRIATE	BOX(ES):						1	1				
Initial Filing of Form	Re-	filing to Change:	Tr	easu	rer/Deput	y [>	< ○ Dep	ositor	y [Off	fice		Party
2. Name of Candidate (in t		First, Middle, L	ast)		. Address ode)	(includ	de post	office	box or	r street,	city, st	ate, z	zip
SHLOMO DANZINGER	}				000 Har	ding A	₹ve						
4. Telephone	5. E-mai	l address		Sı	urfside F	L 33	154						
(305) 306-0445	shlomof	orsurfside@g	mail.co	or									
6. Office sought (include district, circuit, group number) 7. If a candidate for a <u>nonpartisan</u> office, check if					k if								
Mayor					a	oplical		tent is	to run	as a W	rite-In	candi	date
	2 200												
8. If a candidate for a part	<u>isan</u> offic	ce, check block	and fill	in na	ime of pa	rty as	applic	able:	My ir	ntent is	to run a	as a	
Write-In No F	Party Affili	ation 🔲							F	Party	candic	late.	
9. I have appointed the fo	lowing p	erson to act as	my		Campaig	n Trea	surer		Dep	uty Trea	asurer		
10. Name of Treasurer or D	eputy Tre	easurer											
Shlomo Danzinger									10 T I				
11. Mailing Address										ephone		_	
9000 Harding Ave	144.0		45 04-		10 7:- (147 5		addres) 306	0-0445		
13. City Surfside	14. Co	i-Dade	15. Sta FL		16. Zip (33154	ode	100000000000000000000000000000000000000			s de@gi	mail c	om	
18. I have designated the				,	rimary De	nosito	Name and Address of the Owner, where			dary De	-		
19. Name of Bank	- Ionowing	g bank as my			Address	posito		Ш.		adi, Do		, ——	
*	ov 120	V/\		20. 7		Avt	huv	G	octev	reu l	Ra	# 1	02
21. City 14.	71120	22. County			23.	State	hur. Tori		7011	24. 2	Zip Coc	de	
Mianu Be	ach	Mian	G-11	ad	e	F	lovi	da			331	40	
UNDER PENALTIES OF PERJUI		ARE THAT I HAVE OF CAMPAIGN DEF									N TREA	SURE	R AND
25. Date				26. 5	Signature	of Can	ndidate						
03/16/2023				X	M	1	him						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)													
1.	SHLC	MO DANZIN	GER				, do	here	by acce	ept the a	appoint	tment	i
	(Pleas	e Print or Type N	Vame)										
designated above as:	\times	Campaign T	reasurer		Dep	outy Tre	easurer.	65					
03/16/20	03/16/2023 X												
Date	Date Signature of Campaign Treasurer or Deputy Treasurer												



TOWN OF SURFSIDE

MUNICIPAL BUILDING 9293 HARDING AVENUE SURFSIDE, FLORIDA 33154

GENERAL ELECTION - MARCH 19, 2024

RECEIPT OF DOCUMENTS

Candidate:

Shlomo		Danzinger
First Name	Middle Name	Last name
Phone No.:	Office Sought (Mayor or Commissioner) (305) 306-0446 Fax No.:	
Cell Phone:	ess: Shlomofor surfside @ gmail.co	
	nowledge my receipt of the following documents:	
V	The Florida Election Code (2022) – Digital F	ormat (USB)
	Candidate and Campaign Treasurer Handboo Digital Format (USB)	k (2022) –
	Guide to the Sunshine Amendment and Code Digital Format (USB)	of Ethics (2023) –
	Reporting Dates Schedule (Election Date: Ma	arch 19, 2024)
	Campaign Activities Memorandum	
Received by:	Candidate Signature	re: <u>5/2/23</u>



Town of Surfside

9293 Harding Avenue Surfside, Fl 33154

2024 GENERAL MUNICIPAL ELECTION QUALIFYING PACKET

Name of C	Candidate Shlomo Danz	inger.	
Office Sou	ight <u>Mayor</u>	J	
Phone No.	: Cell Phone No:	306)306-04	146
E-Mail Ad	ldress: Shlomoforsurfside @	gmail com	
Contents		Date Received	<u>Initials</u>
1. Qualify	ring as a candidate:		
	Appointment of Campaign Treasurer and Designation of Campaign Depository	5/2/2023 3/14/2023	5P
	Nominating Petition		
	Statement of Candidate	3/16/2023	SD
	Sworn Statement of Qualification		
	Candidate Oath		P =
	Form 1 – Statement of Financial Interest (2022)		·
	Declaration and First Amendment Waiver Volunteer Statement of Fair Campaign Practice		
	Qualifying Fee \$25.00		
	L & A Schedule		
	Proof of Residency		

& Voter Registration		
2. Important Dates to Remember	5/2/2023	SD
3. Campaign Activities Memorandum	5/2/2023.	SD
Candidate's Signature	Date	

CAMPAIGN TREASURE	R'S REPORT SUMMARY			
(1) SHLOMO DANZINGER	OFFICE USE ONLY			
Name (2) 9000 HARDING AVE				
(2) 9000 HARDING AVE Address (number and street)	JUN 1 AM 10:19			
SURFSIDE, FL 33154				
City, State, Zip Code	7			
Check here if address has changed	(3) ID Number:			
(4) Check appropriate box(es): ☑ Candidate Office Sought: MAYOR ☐ Political Committee (PC) ☐ Floationsoring Communications Ora (FCC)				
☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)	 ☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 			
(5) Report	t Identifiers			
Cover Period: From $05 / 01 / 2023$ To	05 / 31 /2023 Report Type: 2023M5			
✓ Original	ecial Election Report			
(6) Contributions This Report	(7) Expenditures This Report			
Cash & Checks \$, ,	Monetary			
Loans \$,, <u>50</u> . <u>00</u>	Transfers to Office Account \$, , .			
Total Monetary \$, ,	Total Monetary \$,			
In-Kind \$, ,				
	(8) Other Distributions \$, ,			
(9) TOTAL Monetary Contributions To Date \$, , 50 . 00	(10) TOTAL Monetary Expenditures To Date \$, , 0 . 00			
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)				
I certify that I have examined this report and it is true, corr	1			
(Type name) SHLOMO DANZINGER	(Type name) SHLOMO DANZINGER			
☐ Individual (only for IE ☑ Treasurer ☐ Deputy Treasurer or electioneering comm.)	☑ Candidate ☐ Chairperson (only for PC and PTY)			
x file Api-	x flee Agen			
Signature	Signature			

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	O DANZINGER			(2)	I.D. Number		
(3) Cover Period	//	through	/	^{31/} / ²⁰²³	_ (4) Page	<u> </u>	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	Conti	8) ributor	(9)	(10) In-kind	(11)	(12)
Number	City, State, Zip Code	Туре С	Occupation	Туре	Description	Amendment	Amount
05 02 23	DANZINGER, SHLOMO 9000 HARDING AVE SURPSIDE, FL 33154 USA	S PR	ODUCT DEV	LOA	,		\$50.00
1 1							
1 1							
1 1							
1 1				:			
1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT _ ITEMIZED EXPENDITURES

(1) Name SHLOMO DANZINGER (2) I.D. Number						
(3) Cover Perio	d	//	4) Page	of _	1	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11)	
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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY



Name SHLOMO DANZINGER	OFFICE USE ONLY
I.D. Number	_
Address (number and street) 9000 HARDING AVE	
City, State, Zip Code SURFSIDE, FL 33154	
☐ CHECK IF ADDRESS HAS CHANGED	
Candidate for:	
⊠ Mayor	
Commissioner, District	- -
☐ Property Appraiser	
☐ Clerk of the Circuit Courts	
☐ Community Council, Area, Su	b-Area
REPORT IDE	NTIFIERS
Report Name 2023M5 Cover Period	05/01/2023 through 05/31/2023
Report Type Original Amendment	
	ICATION
	ton to falsify a public record (ss. 839.13, F.S.)
I certify that I have examined this report and it is true, correct, and complete.	correct, and complete.
SHLOMO DANZINGER	SHLOMO DANZINGER
(Type name)	(Type name)
X Milatin	X fisher from
Signature	Signature

PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES



This report must be filed by applicable candidates running for Town of Surfside Mayor or Town Commissioner.

(1) Name	SHLOMO DANZINGER			(2) I.D. Number	
(3) Report	Name 2023M5	(4) Cover Period	05/01/2023	through <u>05/31</u>	/2023
(5) Report	Type ☑ Original ☐ Amendr	ment (6) Page 1		of 1	
(7) Row Number	(8) Full Name (Last, Suffix, First, Middle)	(9) Employed By	Name of Organiz	10) ation Employed By ired by campaign)	(11) Amendment Type
N/A	N/A	N/A	N/A		N/A
				30	

	CAMPAIGN TREASURER'S REPORT SUMMARY					
(1)	SHLOMO DANZINGER	OFFICE USE ONLY				
(2)	Name 9000 HARDING AVE Address (number and street)					
	SURFSIDE, FL 33154 City, State, Zip Code	- Glo				
	Check here if address has changed	(3) ID Number:				
(4)	Check appropriate box(es): ✓ Candidate Office Sought: ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed				
	(5) Report					
		06 / 30 /2023 Report Type: 2023M6				
		(7) Expenditures This Report				
(6) Cas	Contributions This Report h & Checks \$, , 0 . 00	(7) Expenditures This Report Monetary Expenditures \$, , 0 . 00				
Loa		Transfers to Office Account \$, , , 0 . 00				
Tota	al Monetary \$,,0.00	Total Monetary \$, , 0 . 00				
	, / / ,	(8) Other Distributions \$,				
(9)	TOTAL Monetary Contributions To Date \$,,50.00	(10) TOTAL Monetary Expenditures To Date \$, , 0 . 00				
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)						
1	certify that I have examined this report and it is true, corr	ect, and complete:				
	Type name) SHLOMO DANZINGER Individual (only for IE Treasurer Deputy Treasurer relectioneering comm.)	(Type name) SHLOMO DANZINGER ☑ Candidate ☐ Chairperson (only for PC and PTY)				
	on l	x file Agi				
S	ignature	Signature				

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name (2					2) I.D. Number	FUL 5 PM 4	:09
(3) Cover Period	i / / /	throu	ugh /	/	. (4) Page	i	of
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6)	Full Name (Last, Suffix, First, Middle)						
Sequence Number	Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution	In-kind	Amondment	
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES 4:05 (1) Name SHLOMO DANZINGER (2) I.D. Number							
(3) Cover Perio	od ⁰⁶ / ⁰¹ / ^{_2023} through ⁰⁶ /	//	4) Page	of	1		
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11) t Amount		
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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY



Name	OFFICE USE ONLY
SHLOMO DANZINGER	
I.D. Number	
Address (number and street) 9000 HARDING AVE	JUL 5 pm 4:09
City, State, Zip Code SURFSIDE, FL 33154	
☐ CHECK IF ADDRESS HAS CHANGED	
Candidate for:	
⊠ Mayor	
☐ Commissioner, District	<u>_</u> ,
☐ Property Appraiser	
☐ Clerk of the Circuit Courts	
☐ Community Council, Area, Su	b-Area
REPORT IDE	NTIFIERS
Report Name 2023M6 Cover Period	06/01/2023 through 06/30/2023
Report Type Original Amendment	
CERTIF	ICATION
	son to falsify a public record (ss. 839.13, F.S.)
I certify that I have examined this report and it is true, correct, and complete.	I certify that I have examined this report and it is true, correct, and complete.
SHLOMO DANZINGER	SHLOMO DANZINGER
(Type name)	(Type name)
X MA	X Signature

PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES



This report must be filed by applicable candidates running for Town of Surfside Mayor or Town Commissioner.

(1) Name	SHLOMO DANZINGE	R		(2) I.D. Number	
(3) Report	Name 2023M6	(4) Cover Per	iod 06/01/2023	through <u>06/30</u>)/2023
(5) Report	Type 🛭 Original 🔲 Ame	ndment (6) Page 1		of _1	
(7) Row Number	(8) Full Name (Last, Suffix, First, Midd	(9) Employed By	Name of Organiz	10) ation Employed By ired by campaign)	(11) Amendment Type
N/A	N/A	N/A	N/A		N/A
				JUL 5 PH 4:	20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

CAMPAIGN TREASURER'S REPORT SUMMARY					
(1) SHLOMO DANZINGER OFFICE USE ONLY					
Name (2) 9000 HARDING AVE Address (number and street)	1:42				
SURFSIDE, FL 33154 City, State, Zip Code	=				
☐ Check here if address has changed (3) ID Number:	1				
(4) Check appropriate box(es): ☑ Candidate Office Sought: ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports w	ill be filed				
(5) Report Identifiers					
Cover Period: From 07 / 01 /2023 To 09 / 30 /2023 Report Type:	2023Q3				
✓ Original					
(6) Contributions This Report (7) Expenditures This Report Monetary Expenditures \$	0.00_				
	0 . 00				
Total Monetary \$,,0.00_ Total Monetary \$,,,	0 . 00				
(8) Other Distributions \$, ,					
(9) TOTAL Monetary Contributions To Date \$, , 50 . 00 \$, , , 0 . 00					
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)					
I certify that I have examined this report and it is true, correct, and complete:					
(Type name) SHLOMO DANZINGER (Type name) SHLOMO DANZIN	GER				
☐ Individual (only for IE ☑ Treasurer ☐ Deputy Treasurer or electioneering comm.) ☐ Candidate ☐ Chairperson (only for Identified to the company of the comp	PC and PTY)				
X Miles of figure X Signature Signature					

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name SHLOMO DANZINGER (2) I.D. Number							
(3) Cover Perio	d ⁰⁷ /_ ⁰¹ / ²⁰²³ through ⁰⁹ /	30 / 2023	4) Page	of _	1		
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11) Amount		
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	O DANZINGER			(2)	I.D. Number	CT 4 PH 4:	42
(3) Cover Period	//	throu	gh/	30/ / 2023	_ (4) Page	1	of
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6)	Full Name (Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY



	OFFICE USE ONLY
Name	
SHLOMO DANZINGER	
I.D. Number	
	OCT 4 PM 4:42
Address (number and street) 9000 HARDING AVE	
City, State, Zip Code SURFSIDE, FL 33154	
☐ CHECK IF ADDRESS HAS CHANGED	
Candidate for:	
⊠ Mayor	
☐ Commissioner, District	
☐ Property Appraiser	_
☐ Clerk of the Circuit Courts	
☐ Community Council, Area, Su	h-Area
REPORT IDE	
Report Name 2023Q3 Cover Period	07/01/2023 through 09/30/2023
Report Type Original Amendment	
CERTIF	ICATION
	son to falsify a public record (ss. 839.13, F.S.)
I certify that I have examined this report and it is true, correct, and complete.	I certify that I have examined this report and it is true, correct, and complete.
SHLOMO DANZINGER	SHLOMO DANZINGER
(Type name)	(Type name)
X Meleoco Agin	X Mandrin
Signature	Signature

PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES



This report must be filed by applicable candidates running for Town of Surfside Mayor or Town Commissioner.

(1) Name	SHLOMO DANZING	ER		(2)	0CT 4 PM 4:4 I.D. Number	3
(3) Report	Name 2023Q3	(4) Cov	ver Period <u>07</u>	//01/2023	through <u>09/30</u>	/2023
(5) Report	Type ☑ Original ☐ Am	endment (6) Pag	e <u>1</u>	n	of <u>1</u>	
(7) Row Number	(8) Full Name (Last, Suffix, First, Mid	Employ	yed By Na	(10) ame of Organization if not directly hired	n Employed By by campaign)	(11) Amendment Type
N/A	N/A	N/A	N	/A		N/A
				20		
				•		

CANDIDATE OATH NONPARTISAN OFFICE

(Do not use this form if a Judicial or School Board Candidate)

Check box *only* if you are seeking to qualify as a write-in candidate:

NOV 9 PM 2:59

Write-in candidate Write-in candidate						
- VVIII.C-III Calididate	OFFICE USE ONLY					
	ate Oath					
	(a), Florida Statutes)					
1, SHLOND DANZINGER	If your lost name consists of two or more names but has no					
(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box (see page 2 - Compound Last Names). No change can be made after the end of qualifying.						
Although a write-in candidate's name is not printed on the b	allot, the name must be printed above for oath purposes.)					
am a candidate for the nonpartisan office of	MAUOR, (Office), (District #)					
(Circuit #) , (Group or Seat #) ; I am a qualified elector of	Mani Dade County, Florida;					
I am qualified under the Constitution and the Laws of Florida	to hold the office to which I desire to be nominated or elected; I					
have qualified for no other public office in the state, the term of	of which office or any part thereof runs concurrent with the office					
	required to resign pursuant to Section 99.012, Florida Statutes;					
and I will support the Constitution of the United States and the	Constitution of the State of Florida.					
Candidate's Florida Voter Registration Number (located on y	our voter information card):					
	on the line below as you wish it to be pronounced on the audio ons on page 2 of this form): [Not applicable to write-in candidates.]					
ballot as may be used by persons with disabilities (see instruction	Tis on page 2 of this form). [Not applicable to write-in candidates.]					
X Ille Agin (305) 306.	-0445 Shlomoforsurfside@gnail.com					
Signature of Candidate Telephone Number	Email Address 22/24					
Address City	State ZIP Code					
	Margardy C 1 11 am 11					
STATE OF FLORIDA	Signature of Notary Public Sanda McCready					
COUNTY OF Mani-Dade.	Print, Type, or Stamp Commissioned Name of Notary Public below:					
Sworn to (or affirmed) and subscribed before me by means of						
online notarization OR physical presence	SANDRA MCCREADY MY COMMISSION # HH 360567					
this gen day of November, 2023	EXPIRES: Mey 4, 2027					
Personally Known OR Produced Identification						
Type of Identification Produced:	_					



TOWN OF SURFSIDE

MUNICIPAL BUILDING 9293 HARDING AVENUE SURFSIDE, FLORIDA 33154

GENERAL ELECTION - MARCH 19, 2024

SWORN STATEMENT OF QUALIFICATION

Pursuant to Article VI, Section 102 of the Town of Surfside Charter, this form must be submitted simultaneously with the nominating petitions and qualifying fee of \$25.00 made payable to the Town of Surfside.

STATE OF FLORIDA }
COUNTY OF MIAMI-DADE }
TOWN OF SURFSIDE }
I solemnly swear (or affirm) under oath, that my name is Shome Danzingev
that I am a Citizen of the United States, a qualified elector of Miami Dade County and the Town of
Surfside, Florida; that my address is 9000 Hounding Ave Surfside FL 3315
my occupation is Self Employed; that I have been
a resident of the Town of Surfside since 20/2; that I will be at least twenty-one (21) years of
age by November 22, 2023 and that if elected, I will willingly serve as
(Mayor or Commissioner) of the Town of Surfside, if elected.
Signature of Candidate 11/9/23 Date
Sworn to and subscribed before me this
NOTARY PUBLIC
MY COMMISSION # HH 350567 EXPIRES: May 4, 2027 PRINTED NAME OF NOTARY

FORM 1	STATEM	IENT OF	2022		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	FINANCIAL INTERESTS FOR OFFICE US			
LAST NAME FIRST NAME MIDD DANZINGER, SHLOMO MAILING ADDRESS: 9000 HARDING AVE	LE NAME :				
CITY: SURFSIDE NAME OF AGENCY: TOWN OF SURFSIDE	ZIP: COUNTY: 33154 MIAMI-	DADE		NOV 3 PM 3:01	
NAME OF OFFICE OR POSITION H	ELD OR SOUGHT :				
CHECK ONLY IF CANDIDATE	OR NEW EMPLOYEE OF	RAPPOINTEE			
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS Y MANNER OF CALCULATING FILERS HAVE THE OPTION OF USE FEWER CALCULATIONS, OR USE (see instructions for further details)	REPORTABLE INTERESTS: JSING REPORTING THRESHOL SING COMPARATIVE THRESHO	DR CALENDAR YEAR EN DS THAT ARE ABSOLUTE LDS, WHICH ARE USUAL USING (must check one)	DING DE E DOLLAI LY BASE	R VALUES, WHICH REQUIRES	
PART A PRIMARY SOURCES OF I (If you have nothing to re	NCOME [Major sources of income to port, write "none" or "n/a")	the reporting person - See ins	tructions]		
NAME OF SOURCE OF INCOME		JRCE'S DRESS		SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY	
SELF EMPLOYED	9000 HARDING AVE		PRODUCT MANUFACTURING		
	OF INCOME and other sources of income to busines eport, write "none" or "n/a") NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	erson - See	PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
PART C REAL PROPERTY [Land, I	ouildings owned by the reporting perso port, write "none" or "n/a")	n - See instructions]	lines o sheets	e not limited to the space on the in this form. Attach additional , if necessary.	
			and w	here to file this form are d at the bottom of page 2.	
			this fo	UCTIONS on who must file orm and how to fill it out on page 3.	

PART D — INTANGIBLE PERSONAL PROPERTY [St (If you have nothing to report, write "nor TYPE OF INTANGIBLE	tocks, bonds, certificates of deposit, etc See instructions] ne" or "n/a") BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
CHECKING & SAVINGS ACCT.	CHASE BANK			
RETIREMENT	FIDELITY INVESTMENTS			
PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "nor	ns]			
NAME OF CREDITOR	ADDRESS OF CREDITOR			
LOANCARE	P.O. BOX 8068, VIRGINIA BEACH, VA 23450			
U.S. BANK	P.O. BOX 2188, OSHKOSH, WI 54903-2188			
PART F — INTERESTS IN SPECIFIED BUSINESSES (If you have nothing to report, write "none NAME OF BUSINESS ENTITY	[Ownership or positions in certain types of businesses - See instructions] " or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2			
ADDRESS OF BUSINESS ENTITY				
PRINCIPAL BUSINESS ACTIVITY				
POSITION HELD WITH ENTITY				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS				
NATURE OF MY OWNERSHIP INTEREST				
PART G — TRAINING For elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment agency created under Part III, Chapter 163 required to complete annual ethics training pursuant to section 112.3142, F.S. I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.				
IF ANY OF PARTS A THROUGH G ARI	E CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE			
SIGNATURE OF FILE				
Signature:	If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement: I,, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.			
Date Signed:	CPA/Attorney Signature:			
11/09/2023	Date Signed:			

FILING INSTRUCTIONS:

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location. To determine what category your position falls under, see page 3 of instructions.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

WHEN TO FILE: *Initially*, each local officer/employee, state officer, and specified state employee must file *within 30 days* of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2022.

YOU MUST BE A REGISTERED VOTER OF THE TOWN OF SURFSIDE TO SIGN THIS PETITION PLEASE SIGN AND PRINT YOUR NAME CLEARLY

NOMINATING PETITION FOR MAYOR OR COMMISSIONER 2:59

TOWN OF SURFSIDE, FLORIDA

val. It are also signs at all atoms of the Town of Surfaids	Florida, hereby nominate Shlomo Danzinger
We the undersigned electors of the Town of Surfside, for the office of	(Mayor or Commissioner) at an election to be held on March
19, 2024.	,
This petition must be filed with the Town Clerk between	en November 3, 2023 and November 22, 2023(by 12:00pm).
Signature:	Date: <u>19/2/23</u> D.O.B
Print Name: Schreur / 195Kar	Address:
Signature:	Date: <u>/0/2/23</u> D.O.B.
Print Name: KINKAH LIPSKOR	Address:
Signature:	Date: DOB
Print Name: ISSER, NEW	Address:
Signature: , Ald yur	Date:
Print Name: Alon Atten Davoubou	Address:
Signature:	Date: <u>///3 /2023</u> D.O.B
Print Name: Rei MR G.S.	Address:
Signature:	Date: 11/3/23 D.O.B.
Print Name: TSME CSAMIL	Address:
Signature: 1) C GOV	Date: 1 6 2 3 D.O.B
Print Name: DAYD FORBES	Address
Signature:	Date: 11.7.23 D.O.B.
Print Name: SUMUEL GreenWALD	Address:
Signature: Marticle Anticelt	Date: 11-7-23
Print Name: Marida Ruga Strycel	Address
Signature:	Date: 11/7/23 D.O.B.
Print Name: Met Schleece	Address:
Signature:	Date: 11/2/23 D.O.B.
Print Name: (15AAC Bennergus	Address:
Signature: (Telling)	Date: 1/- /2 23 D.O.B.
Print Name: PA+glic'A CACLO IS Ky	Address:
Signature:	Date:
Print Name: Young Bost	Address:
STATEMENT	OF CIRCULATOR
The undersigned is the circulator of the foregoing paper co	ontaining 18 signatures. Each signature appended
thereto was made in my presence and is the genuine sign	ature of the person whose name it purports to be.
Signature of Circulator:	
Address of Circulator: 9000 Harding Ave	Surfside Fi 33154
Email address of Circulator: Shipmo Forsium	Side a gualicon
I hereby accept the nomination of Mayor	E OF NOMINATION (Mayor or Commissioner) and agree to
serve if elected.	(Major of Commissions, and agree to
Signature of Condidate:	Date: 11-9-23

YOU MUST BE A REGISTERED VOTER OF THE TOWN OF SURFSIDE TO SIGN THIS PETITION PLEASE SIGN AND PRINT YOUR NAME CLEARLY

NOMINATING PETITION FOR MAYOR OR COMMISSIONER

TOWN OF SURFSIDE, FLORIDA NOV 9 PM 2:59

We the undersigned electors of the Town of Surfside,	Florida, hereby nominate Momo Dan wy	
for the office of \(\frac{1}{2}\) (LQ)	(Mayor or Commissioner) at an election to be held on March	
19, 2024.		
This petition must be filed with the Town Clerk between	en November 3, 2023 and November 22, 2023(by 12:00pm).	
10	Date: NOV 7 20-B.O.B.	
Signature:		
Print Name:	Address: Date: U.S. D.O.B.	
Signature:		
Print Name: Steep Sett NEGO in	Address:	
Signature: 18 Shoop (1919)	Date: _11-7-2023D.O.B.	
Print Name: Baila ShagaluW	Address: Date: 4/11/2/2/2008	
Signature:		
Print Name: Print	Address: 40 Address:	
Signature:	Date: 4/18/23D O B	
Print Name: Will Your Value	Address:	
Signature: Real tool	Date: 11/7/73 D.O.B.	
Print Name: bean Rose	Address:	
Signature: Simo Syzulos	Date: 11/10.21/2Z DOR	
Print Name: A. Dertonou	Address:	
Signature:	Date:	
Print Name: Daniel Bacoulc	Address:	
Signature: Month	Date: 1/17/23 D.O.B.	
Print Name: Bichard Lichter	Address:	
Signature:	Date: 11/2/23 D.O.B.	
Print Name: Print Name: Print Name:	Address:	
Signature: 499	Date: $11/7/23$ D.O.B.	
Print Name: ANDRAW POR 165	Address:	
Signature:	Date: 1111/23 D.O.B.	
Print Name: TIW ITEMY	Address	
Signature:	Date: 1(/7/)3 D.O.B.	
Print Name: Dh DACHS	Address:	
	OF CIRCULATOR	
The undersigned is the circulator of the foregoing paper conthereto was made in my presence and is the genuine signal	ontaining signatures. Each signature appended	
thereto was made in my presence and is the genuine signa	ature of the person whose name it purports to be.	
Signature of Circulator: Mh. fyr		
Address of Circulator: 9000 Harding Are	Surfs de Fi 33154	
Email address of Circulator: 5 Nome for surfside @ gradicon ACCEPTANCE OF NOMINATION		
I hereby accept the nomination of Mayor	E OF NOMINATION (Mayor or Commissioner) and agree to	
serve if elected.	(Mayor or Commissioner) and agree to	
	Date: 11-9-23	
Signature of Candidate:	Date:Date:	

YOU MUST BE A REGISTERED VOTER OF THE TOWN OF SURFSIDE TO SIGN THIS PETITION PLEASE SIGN AND PRINT YOUR NAME CLEARLY

NOMINATING PETITION FOR MAYOR OR COMMISSIONER

	TOWN OF SURFS	IDE, FLORIDA	01 1 NOV 9 PM 2:59
We the undersigned electors	of the Town of Surfside, Florida	a, hereby nomináte 🚄	Shlomo Danzinger
for the office of	^(Mayo	or or Commissioner) a	at an election to be held on March
19, 2024.			
This petition must be filed	with the Town Clerk between Nove	ember 3, 2023 and Nove	ember 22, 2023(by 12:00pm).
Signature:		Date: 05/03/23	D.O.B.
	nzinger Ado	lress:	
Signature: David	211	Date: <u>5/3/5</u> 3	D.O.B.
Print Name: David	Karp Ado	lress:	
Signature:		Date: 5/3/23	D.O.B.
DII	anzinger Ado	lress:	
Signature: Signature:		Date: <u>5/3/23</u>	D.O.B. ⁶
	bse Ado	lress:	
Signature:		Date: <u>/</u> 0-2-23	D.O.B.
Print Name: HEAMERT EV	HRMIN Ado	ress:	
Signature: Mul V/MM	2	Date: 10/2/73	D.O.B. /
Print Name: Howard Ve	Dainisk Ado	ress:	
Signature: Hershel		Date: <u>10/2/23</u>	D.O.B.
int Name: Hershel Danzi	nger Add	ress:	
Signature:		Date: 10/2d/23	_ D.O.B
Print Name: Showel L	CUV Add	ress:	
Signature:	م	Date: 10 20 23	D.O.B.
Print Name: 5/2000	Edelkonf Add	ress:	
Signature: Chama Mu	WA	Date: 10/20/23	_ D.O.B
Print Name: Chang Ehr	lieh Add	ress:	/
Signature:	h-	Date: 10/20/23	D.O.B
Print Name: Shmuel Frie	edman Add	ress:	<u></u>
Signature:/\/		Date: 10-20-23	3 D.O.B.
Print Name: Wenachem	Brod Add	ress:	
Signature: #		Date: 11 2 2023	_D.O.B. <u>3</u> /
Print Name: FRED LANDS	M D r) Add	ress:	1
. (STATEMENT OF C	IRCULATOR	
The undersigned is the circulator of		U	es. Each signature appended
thereto was made in my presence	and is the genuine signature of	f the person whose n	ame it purports to be.
Signature of Circulator:	Me the	afect -1 3	3154
ddress of Circulator: 9000	Harding Ane Sul	12100 FL 3	0000
_mail address of Circulator: Shome for Surfside (anal.com			
I hereby accept the nomination of	Mayor	(M	layor or Commissioner) and agree to
serve if elected.	111		, , , , , ,
Signature of Candidate:	VA:		Date: 1/-9-23
	70		

YOU MUST BE A REGISTERED VOTER OF THE TOWN OF SURFSIDE TO SIGN THIS PETITION PLEASE SIGN AND PRINT YOUR NAME CLEARLY NOV 9 PM 3:00

NOMINATING PETITION FOR MAYOR OR COMMISSIONER

TOWN OF SURFSIDE, FLORIDA

We the undersigned electors of the Town of Surfside,	Florida, hereby nominate Showo Davizingen			
for the office ofMayor	_ (Mayor or Commissioner) at an election to be held on March			
This petition must be filed with the Fown Clerk between	en November 3, 2023 and November 22, 2023(by 12:00pm).			
Signature:	Date: <u>(0/2/23</u> D.O.B.			
Print Name: 54/0100 Kata1	Address: 4			
Signature:	Date: 10 · 2 · 22 D.O.B.			
Print Name: AARON LIPSKIN	Address:			
Signature: C. Jin	Date: <u>(</u> ○ · ス · 2 3 D.O.B.			
Print Name: Chaya Mushka Goskan	Address:			
Signature:	Date: 10/2/(で13 D.O.B.			
Print Name: SHEA SCHNEDE	Address			
Signature: 5 M	Date:D.O.B.			
Print Name: SHNY9 F9849>H	Address:			
Signature:	Date: $(a/2/2)^2$ D.O.B.			
Print Name: Toel Rothun	Address:			
Signature:	Date:(G()_() >DOB_			
Print Name: Dlen Rockman	Address:			
Signature: MANON	Date:/6/2/23_ D.O.B.			
Print Name: Ahavon Rubinstein	Address:			
Signature: Alalan	Date:D.O.B.			
Print Name: (Swit takan	Address:			
Signature: DCOR	Date: 10/2/23 D.O.B.			
Print Name: Bezalel Camissar	Address:			
Signature:	Date: 10-02-23 D.O.B.			
Print Name: JONATHAN RUKINSTEIN	Address:			
Signature:	Date: 10/2/23 D.O.B.			
Print Name: Doba Klynyer	Address:			
Signature:	Date: 10/2/23 D.O.B.			
Print Name: Esty Scheiner	Address: 75-77			
STATEMENT OF CIRCULATOR				
The undersigned is the circulator of the foregoing paper co	ontaining 13_ signatures. Each signature appended			
thereto was made in my presence and is the genuine signature of the person whose name it purports to be.				
Signature of Circulator:				
Address of Circulator: 9000 Handing Ane Suntside FL 33154				
Email address of Circulator: Shown for surfside @ gmail.com ACCEPTANCE OF NOMINATION				
I hereby accept the nomination of	(Mayor or Commissioner) and agree to			
serve if elected.				
Signature of Candidate:	Date: <u><i>U-9-23</i></u>			

YOU MUST BE A REGISTERED VOTER OF THE TOWN OF SURFSIDE TO SIGN THIS PETITION PLEASÉ SIGN AND PRINT YOUR NAME CLEARLY

NOMINATING PETITION FOR MAYOR OR COMMISSIONER

TOWN OF SURFSIDE, FLORIDA

We the undersigned electors of the Town of Surfside	e, Florida, hereby nominate SNOMO Danzinger	
for the office of Moyor 19, 2024.	_ (Mayor or Commissioner) at an election to be held on March	
	November 2, 2022 and November 22, 2022/by 12:00pm)	
This petition must be filed with the Town Clerk between	een November 3, 2023 and November 22, 2023(by 12:00pm).	
Signature:	Date://_7/2	
Print Name: New Capita West	Address:	
Signature:	Date: _///7/13 D.O.B.	
Print Name 1 1AcoB WEISS	Address:	
Signature: WAFO SCUP	D.O.B	
Print Name:	Address:	
Signature:	Date://-7 - / 3 D O B	
Print Name: Minyam KNAFO SCHAPIRA	Address:	
Signature: Michaele Koraca	Date: 11/7/23D.O.B	
Print Name: NICOLE KOVACS	Address:	
Signature:	Date: <u>/////b-3</u> D.O.B. <u>C</u>	
Print Name: AARON GEN CEIZ	Address:	
Signature: Care up Scenne	Date:// 7/23D.O.B	
Print Name: CAROLYN BAUMEL	Address:	
Signature:	Date: _ <u>///7 / 2 </u>	
Print Name: Janette Hinciquerca	Address:	
Signature:	Date:	
Print Name: MI Charl Maguerra	Address:	
Signature:	Date: <u>11/1/23</u> D.O.B	
Print Name: Mychael 53 AANANSVO	Address:	
Signature: Notes when	Date: 11/7/23 D.O.B. (
Print Name: StoShanna Stein	Address:	
Signature:	Date: 11/7/23 D.O.B	
Print Name: 03,000 BO030	Address:	
Signature:	Date: 11 /03 D.O.B.,	
Print Name: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Address:	
STATEMEN'	T OF CIRCULATOR	
The undersigned is the circulator of the foregoing paper of	containing 13 signatures. Each signature appended	
thereto was made in my presence and is the genuine sign		
Signature of Circulator:		
Address of Circulator: <u>9000 Handing Ave</u>	Surtsido FL 33154	
Email address of Circulator: 5 homo for Surfude @ gmail.com ACCEPTANCE OF NOMINATION		
I hereby accept the nomination of Mayor	(Mayor or Commissioner) and agree to	
serve if elected.	(major of commissioner, and agree to	
	Date: 1/-9-23	
Signature of Candidate:	Date. 11-1-00	

Shlomo Danzinger Campaign Account 9000 Harding Ave Surfside, FL 33154

FIRST HORIZON BANK 165 MADISON AVE MEMPHIS, TN 38103

STEAT STANDARD ON BACK

11/09/2023

\$ 25.00

PAY

Twenty-five and 00/100 Dollars

TO THE ORDER OF

The Town of Surfside

мемо: Qualifying Fee

From

Shlomo Danzinger Campaign Account 9000 Harding Ave Surfside, FL 33154

To

The Town of Surfside

Amount \$25.00

Date

11/09/2023

Memo

Qualifying Fee

NOV 9 PM 3:00





Town of Surfside

9293 Harding Avenue Surfside, Fl 33154

2024 GENERAL MUNICIPAL ELECTION QUALIFYING PACKET

Name of Car	ndidate <u>Shlomo</u> Danz	inger.	
Office Soug	ht <u>Mayor</u>	J	
Phone No.:	Cell Phone No:	606)306-bu	146
E-Mail Address: ShlomoforSurfside @ gmail . Com			
Contents		Date Received	<u>Initials</u>
1. Qualifyir	ng as a candidate:		
	Appointment of Campaign Treasurer and Designation of Campaign Depository	5/2/2023 3/14/2023	SP
7	Nominating Petition	119/2023	-
S	Statement of Candidate	3/16/2023	SD
S	Sworn Statement of Qualification	11/9/2023	SD
(Candidate Oath	11/9/2023	SD
F	Form 1 – Statement of Financial Interest (2022)	11/9/2023	50
	Declaration and First Amendment Waiver Volunteer Statement of Fair Campaign Practice		:
(Qualifying Fee \$25.00	11/9/2023	SD
I	& A Schedule		
F	Proof of Residency		

& Voter Registration

2. Important Dates to Remember

3. Campaign Activities Memorandum

11/9/2023

SD

5/2/2023

SD

5/2/2023.

SD

Candidate's Signature

Date



Elections
2700 NW 87th Avenue
Miami, Florida 33172
T 305-499-8683 F 305-499-8547
TTY: 305-499-8480

miamidade.gov

November 13, 2023

Sandra McCready, MPA, MMC Town Clerk Town of Surfside 9293 Harding Ave Surfside, FL 33154

Dear Mrs. McCready:

The Miami-Dade Elections Department has completed the verification of the petitions for Shlomo Danzinger, a candidate for the office of Mayor for Town of Surfside. A total of 65 petitions were submitted. Per your request, we were to review petitions until a total of 25 valid petitions were met. Therefore, a total of 29 petitions were reviewed for verification; of which 25 were certified.

For purposes of signature verification, my office follows the directives given by the municipality. You are encouraged to ensure compliance with municipal charter or code requirements.

Please find the certification for the petition enclosed. Should you have any questions or concerns, please feel free to contact Michelle McClain, Deputy Supervisor of Elections for Voter Services at 305-499-8302.

Sincerely,

Christina White

Supervisor of Elections

Enclosure (1)



Elections

2700 NW 87th Avenue Miami, Florida 33172 T 305-499-8683 F 305-499-8547 TTY: 305-499-8480

miamidade.gov

CERTIFICATION

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE)

I, Christina White, Supervisor of Elections of Miami-Dade County, Florida, do hereby certify that <u>25</u> signatures submitted by <u>Shlomo Danzinger</u> for the office of <u>Mayor</u> for the <u>Town of Surfside</u> matched the signatures on the voter files.

Christina White Supervisor of Elections WITNESS MY HAND
AND OFFICIAL SEAL,
AT MIAMI, MIAMI-DADE
COUNTY, FLORIDA,
ON THIS 13th DAY OF
NOVEMBER, 2023



MUNICIPAL BUILDING 9293 HARDING AVENUE SURFSIDE, FLORIDA 33154-3009

Telephone: 305 861-4863

Sandra N. McCready, MPA, MMC, Town Clerk

November 20, 2023

Mr. Shlomo Danzinger 9000 Harding Avenue Surfside, Fl 33154

Dear Mr. Danzinger:

I am pleased to inform you that according to records on file in this office, you have qualified as a candidate for the office of the Town Commission for the Town of Surfside. Your name will be placed on the ballot for the March 19, 2024 Municipal Election.

Congratulations on your qualification and if I can assist in any way throughout the process, please feel free to contact me.

Veratruly yours,

Sandra N. McCready, MPA, MMC

Town Clerk

	CAMPAIGN TREASURE	
	CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1)	SHLOMO DANZINGER	OFFICE USE ONLY
(2)	Name 9000 HARDING AVE	JAN 10 PH 3:41
(2)	Address (number and street)	- Me
	SURFSIDE, FL 33154	
	City, State, Zip Code	
	Check here if address has changed	(3) ID Number:
(4)	Check appropriate box(es):	
	Candidate Office Sought: MAYOR	
	☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded
	☐ Party Executive Committee (PTY)	☐ Check here if PTY has disbanded
	☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)	Check here if no other IE or EC reports will be filed
	individual making electioneering communications)	
	(5) Report	Identifiers
Cov	er Period: From 10 / 01 /2023 To	12 / 31 /2023 Report Type: 2023Q4
 ✓ 0	riginal Amendment Spe	ecial Election Report
(6)	Contributions This Report	(7) Expenditures This Report
Casl	h & Checks \$, _31 , 57900	Monetary
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$ 0.00
Tota	I Monetary \$, , 0 . 00	, , , ,
In-Ki	ind \$, , 0.00	Total Monetary \$, , 0 . 00
		(8) Other Distributions
		\$,,
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
(3)	\$, 31, 629 . 00	\$, 3 , 284 . 65
	·	·
	(11) Cert It is a first degree misdemeanor for any perso	
Ιd	certify that I have examined this report and it is true, corre	ect, and complete:
ſΤ	ype name) SHLOMO DANZINGER	(Type name) SHLOMO DANZINGER
	Individual (only for IE	☐ Chairperson (only for PC and PTY)
or	electioneering comm.)	NN 1
X	Sudantoni	x the Age
Si	gnature	Signature

JAN 10 PM 3:41

(1) Name	SHLO	SHLOMO DANZINGER						(2) I.D. Number						
(3) Cover P	eriod	10	/ 01	/23	through	12 /	31	ı 23	(4) Page	1	of 10			
(3) Cover P	erioa	. 10	/ 01	123	unrougn	1Z/	J 1	/ 23	(4) Page	ı	OT IU			

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(1 <u>2</u>)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Contributor Type Occupation		Contribution Type	In-kind Description	Amendment	Amount
10, 28 , 23	RyaniSilverman 1958 West Gray St Houston TX 77019	I	Attorney	RCT			1000.00
10, 28 , 23	Roberto Bolona 730 SW 78th Ave Plantation FL 33324	I	Real Estate	RCT			1000.00
11 , 13 , 23	Eli Kagan 250 95th Street Unit 546703 Surfside FL 33154	1	Design	RCT			100.00
11 , 13 ,23	Alexander Rindner 9401 Collins Ave #1203 Surfside FL 33154	I	Investor	RCT			200.00
11, 13 , 23	Jonathan Fish 9232 Abbott Avenue Surfside FL 33154	1	Self	RCT			500.00
11 , 13 ,23 6	Baruch Edelkopf 9341 Collins Ave #202 Surfside, FL 33154	Ι	Real Estate	RCT			100.00
11 ₁ 13 ₁ 23	Shlomo Sam Pessar 9341 Collins Avenue #603 Surfside FL 33154	I	Real Estate	RCT			100.00

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(1) Name <u>S</u>					(2) I.D. Number									
(3) Cover Peri	od 1	0	/ 01	123	through	12	1	31	1 23	(A) Page	2	of	10	

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
11 , 14 ,23	Esty Scheiner 9341 Collins Ave. #507 Surfside FL 33154	l	Self	RCT			18.00
11 , 14 , 23	Louis Ezrick 9261 East Bay Harbor Drive #704 Bay Harbor Islands FL 33154	I	Physical Therapist	RCT			100.00
11 , 15 , 23	Shlaime Mochkin 9424 Abbott Ave Surfside FL 33154	1	Self	RCT			50.00
11 , 15 , 23	Josh Gre 9549 Carlyle Ave Surfside FL 33154	I	Consultant	RCT			100.00
11, 20 , 23	David B Karp 9341 Collins Ave #1208 Surfside, FL 33154	Ī	Retired	CHE			100.00
11 / 21 / 23	Daniel Gielchinsky 2875 NE 191st Street Suite 705 Aventura FL 33180	I	Lawyer	RCT			500.00
11 , 22 , 23	Jonathan Rubinstein 9389 Byron Avenue Surfside FL 33154	1	Teacher	RCT			25.00

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(1) Name	SHL	SHLOMO DANZINGER						JAN 10 PM 3:42 (2) I.D. Number						
(3) Cover P	eriod	10	/ 01	/23	through	12	1	31	/ 23	(4) Page	3	of	10	

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	în-kind Description	Amendment	Amount
11 / 25 / 23 15	Dovid Weingot 9595 Collins Ave Apt 508 Surfside FL 33154-2636	1	Self	RCT			1000.00
11 / 25 / 23	Alon Davoudpour 600 94 Street Surfside FL 33154	l	Real Estate	RCT			1000.00
11 <u>26</u> 23	Michael Blisko 9390 Bay Drive Surfside FL 33154	I	Executive	RCT			1000.00
11 / 26 /23 18	Ronit Blisko 9390 Bay Drive Surfside FL 33154	I	Homemaker	RCT	_		1000.00
11 , 26 , 23 19	Shoshana Blisko 9390 Bay Drive Surfside FL 33154	I	Marketing	RCT			1000.00
11 _/ 26 _/ 23 20	Goldie Blisko 9390 Bay Drive Surfside FL 33154	I	Teacher	RCT			1000.00
11 , 26 , 23 21	Sara Blisko 9390 Bay Drive Surfside FL 33154	1	Student	RCT			1000.00

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(1) Name			(2) 1.[JAN 10 PH 3:42 (2) I.D. Number					
(3) Cover Period	10_/	01 / 23	through	12 / 31	/ 23	(4) Page	4	of _10	<u> </u>

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name		(0)	(0)	(10)	('''	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	ln-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
11 / 27 / 23	Deborah Stern 220 Surrey Road Hillside NJ 07205	ı	Homemaker	RCT	•		1000.00
22							
11 _/ 27 _/ 23	Yitzhak Stern 220 Surrey Road Hillside NJ 07205	I	Self	RCT		-	1000.00
11 / 27 / 23	Yisroel Bernstein 531 Brooklyn Avenue Brooklyn NY 11225	ı	Sales	RCT			500.00
24	Joseph Transfer						
11 _/ 27 _/ 23 25	Hillel Mendelovitz 9559 Collins Avenue 903s Surfside FL 33154	I	Retired	RCT			100.00
11 / 28 / 23	Robert Hartman 10155 Collins Ave 810 Bal Harbour FL 33154	ī	Investor	RCT			1000.00
11 / 29 / 23	Eli Levitin 1222 East 22nd St Brooklyn, NY 11210	·I	Lawyer	RCT			1000.00
11 / 30 / 23	Yair Massri 700 92nd Street - Surfside FL 33154	I	Rabbi	RCT			100.00
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(1)	Name SH	LOMO DANZINGER	JAN 10 PM 3:42 (2) I.D. Number									
(3)	Cover Period	10 / 01 / 23	throu	gh <u>12</u> /	31 / 23	(4) Page		of <u>10</u>				
11	(5) Date (6) Sequence Number / 30 / 23	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Jack Klein 19 Briarwood Lane Suffern, NY 10901	Co Type	(8) ontributor Occupation Self	(9) Contribution Type CHE	(10) In-kind Description	(11) Amendment	(12) Amount 1000.00				
11 30	, 30 ,23	Samuel Rottenstein 9455 Collins Ave #802 Surfside FL 33154	I	Self	CHE			1000.00				
12 31	, 1 , 23	Eric Edidin 9548 Bay Drive Surfside FL 33154	ı	Self	RCT			1000.00				
12 32	, 1 , 23	Iris Herssein 701 94th Street Surfside FL 33154	ī	Attorney	RCT			250.00				
12 33	, 3 , 23	Ariel Mangami 1175 101st Street #2 Bay Harbour Islands FL 33154	I	Retired	RCT			100.00				
12 34	, 4 , 23	Marc Mouhadeb 9108 Abbot Ave Surfside FL 33154	I	Analyst	RCT			50:00				
12 35	, 4 _, 23	Fred Walfish 9273 Collins Ave #312 Surfside FL 33154	I	Self	CHE			1000.00				

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(1)	Name SH	LOMO DANZINGER			JHN 10 PM 3:42 (2) I.D. Number				
(3)	Cover Period	10 / 01 / 23	throu	gh <u>12</u> /	31	/ 23	_ (4) Page	6	of <u>10</u>
12	(5) Date (6) Sequence Number / 4 / 23	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Anna Rose Rottenstein 9455 Collins Ave #802 Surfside FL 33154	Co Type I	ontributor Occupation Homemaker	Conti	(9) ribution ype	(10) In-kind Description	(11)	Amount 500.00
12 37	, 4 _, 23	Herman Simon Goldstein 9455 Collins Ave Surfside FL 33154	I	Self	CHE			-	500.00
12 38	, 5 _, 23	Daniel Shapiro 9364 Bay Drive Surfside FL 33154	I	Retired	RCT				1000.00
12 39	, 5 _/ 23	Bentzion Shemtov 8911 Abbot Ave Surfside FL 33154	I	Self	RCT				100.00
12 40	, 8 , 23	Charles A Scharf 9540 Byron Ave Surfside FL 33154	I	Seif	RCT				1000.00
12 41	, 8 , 23 ,	Mates Roth 9455 Collins Ave #901 Surfside FL 33154	-	Self	RCT				500.00
12 42	, 10 _/ 23	Shea Schneider 8942 Garland Ave Surfside FL 33154	l	Sales					50.00

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(1) Name SH	LOMO DANZINGER	(2) I.D. Number								
(3) Cover Period	10 / 01 / 23	throu	gh <u>12</u> /	31 / 23	_ (4) Page		of <u>10</u>			
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)		(9)	(10)	<u>(</u> 11)	(12)			
Sequence Number	Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount			
12 _/ 15 _/ 23 43	Linden Nelson 924 88th Street Surfside FL 33154	I	Advertising	CHE			1000.00			
12 / 15 / 23 44	Michelle Nelson 924 88th Street Surfside FL 33154	1	Homemaker	CHE			1000.00			
12 _/ 17 _/ 23	Jonah Bardos 9559 Collins Ave Surfside FL 33154	. I	Doctor	RCT			250.00			
12 _/ 18 _/ 23 46	Albert Belecen 9595 Collins Ave N 507 Surfside FL 33154	1	Retired	RCT			18.00			
12 _/ 21 _/ 23	Yossi Yaacov 9424 Bay Drive Surfside FL 33154	I	Self	RCT			1000.00			
12 , 24 , 23 48	Donna Omari 10275 Collins Ave Bal Harbour FL 33154	I	Retired	RCT			54.00			
<u>12 / 24 / 23</u> 49	Dana Messika 9801 Collins Ave #20C Bal Harbour, FL 33154	I	RN	RCT			25.00			

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(1) Name SHI	LOMO DANZINGER			(2)	I.D. Number	9 <u>N 10 pm 3</u>	:43
(3) Cover Period	10 / 01 / 23	throu	gh <u>12</u> /	31 / 23	_ (4) Page	8	of <u>10</u>
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	Co	(8) ontributor	(9) Contribution	(10)	(11)	(12)
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
12 / 24 / 23 50	Naftali Kaplan 9273 Collins Ave #409 Surfside FL 33154	1	Iπ	RCT			36.00
12 _/ 26 _/ 23 51	Moshe Lew 1149 97th Street Bay Harbour Islands FL 33154	I	Web Developer	RCT			100.00
12 / 26 / 23 52	Eli Bryski 1143 97th Street Bay Harbour Islands FL 33154	I	Student	RCT			50.00
	Gabriel Ammar	ı	Self	RCT			500.00

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924 93rd Street Surfside FL 33154

Aron Zanger 9559 Collins Ave

David Herman

9595 Collins Ave #209 Surfside FL 33154

Avrohom Chayempour 21094 Las Brisas Circle Boca Raton FL 33433

Surfside FL 33154

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JAN 10 PM 3:43

(1) Name SH	LOMO DANZINGER	(2) I.D. Number								
(3) Cover Period	10 / 01 / 23	throu	gh <u>12</u> /	<u>31</u> / <u>23</u>	_ (4) Page	9	of <u>10</u>			
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Magdalena Charme 9595 Collins Ave #408 Bal Harbour FL 33154	Co Type	(8) ontributor Occupation Doctor	(9) Contribution Type RCT	(10) In-kind Description	(11)	(12) Amount 500.00			
12 , 26 , 23 58	Aryeh Schottenstein 9559 Collins Ave #205S Surfside FL 33154	I	Self	RCT			25.00			
12 / 27 / 23 59	Steven B Schwartz 9595 Collins Ave #404 Surfside FL 33154	I	Retired	RCT	_		500.00			
12 _/ 27 _/ 23 60	Walter Molofsky 9459 Collins Ave Surfside FL 33154	1	MD	RCT			100.00			
12 _/ 27 _/ 23 61	Roy Raskin 824 88th Street Surfside FL 33154	1	Architecture	RCT			1000.00			
12 _/ 27 _/ 23 62	Paul Kruss 2600 East Island Blvd #702 Aventura FL 33160	1	Self	RCT			180.00			
12 _/ 27 _/ 23	Ronald Glass 9401 Collins Ave #1205 Surfside FL 33154	l	Retired	RCT			100.00			

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(1) Name SHI	LOMO DANZINGER		(2)	JAN 10 PM 3:43						
(3) Cover Period	10 / 01 / 23	throu	gh <u>12</u> /	31_ / 23	_ (4) Page		of <u>10</u>			
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	(8) ontributor Occupation	(9) Contribution Type	(10) în-kind Description	(11)	(12)			
12 / 27 / 23 64	Morris Tuchman 9401 Collins Ave Surfside FL 33154	1	Attorney	RCT			180.00			
12 _/ 28 _/ 23 65	Edward Safdie 9499 Collins Ave Surfside FL 33154	I	Retired	RCT			500.00			
12 _/ 29 _/ 23	Mario Loyola 8959 Carlyle Ave Surfside FL 33154	I	Self	RCT			500.00			
12 _/ 29 _/ 23 67	Amold Christmas 9156 Collins Ave #309 Surfside FL 33154	1	Retired	RCT			50.00			
12 _/ 31 _/ 23 68	Jerry Freund 9156 Collins Ave #210 Surfside FL 33154	I	Executive	RCT			100.00			
<i>I</i>										
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(1) Name SHLOMO D	ANZING	ER				(2) I.D. Number		
(3) Cover Period 10	_/ 01	_/ 23	through 12	/31	_/ 23	(4) Page 1	of ⁹	

(5) Date	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
10 /28/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
10 /28/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
11 /02/23 3	Constant Contact 1601 Trapelo Road Suite 329 Waltham, MA 02451	Digital Marketing	CAN		396.00
11 /06/23	Wix.com 2601 Mission St. Suite 300 San Francisco, CA 94110	Web Hosting	CAN		162.00
11 /13/23 5	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
11 /13/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		8.30
11 /13/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
11 /13/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30

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(1) Name SHL	OMO DANZII	NGER		(2) I.D. Number				
(3) Cover Period	10 /01	_/ 23	through 12	, 31	, 23	(4) Page ²	of ⁹	

(5) Date	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
11 /13 / 323	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
11 /14/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.02
10					
11 /14/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
11			·		
11 /15/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		2.30
12					
11 /20/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
13					
11 /20/23	Town of Surfside 9293 Harding Ave Surfside FL 33154	Filing Fee	CAN		25.00
14					
11 /21/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
15					
11 /22/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.30
16					

(1) Name SHLOM	(1) Name SHLOMO DANZINGER							(2) I.D. Number			
(3) Cover Period	10	<i>j</i> 01 <i>i</i>	/23	through 12	2 /	31	/23	(4) Page	3	of	9

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
11/24/23	CVS 9578 Harding Ave Surfside, FL 33154	Postage & Shipping	CAN		4.92
17				<u> </u>	
11 /24 / 23	United States Postal Service 250 95th Street Surfside, FL 33154	Postage & Shipping	CAN		26.40
18					
11 / 25 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
19					
11 /25/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
20				;	
11 / 26/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN ·		40.30
21					
11/26/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
22					
11 / 26 /23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
23	-				
11/26/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN	-	40.30
24					

(1) Name SHLOMO DANZINGER								(2) I.D. Number_			
(3) Cover F	Period 10	/01	<i>p</i> 23	through 1	2	/ 31	/23	(4) Page 4	of	9	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
11/26/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
11 /27 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
11 / 27 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
11 /27 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
11 /27 /23 29	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
11/28/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
11/29/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
11/30/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30

(1) Name _	SHLOMO	DANZI	NGER_					 (2) I.D. Nur	nber			
(3) Cover P	eriod_ 10	/ 01	/ 23	through	12	/ 31	_/ 23	(4) Page	5	of	9	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
12/01/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
12/01/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		10.30
12 / 03 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
12 /04 /23	Google Suites 1600 Amphitheatre Pkwy Mountain View, CA 94043	Email Domain	CAN		12.00
12 /04 /23 37	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		2.30
12 / 05 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
12 / 05 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
12 / 08/ 23 40	Starbucks 9560 Harding Ave Surfside, FL 33154	Campaign Supplies	CAN		19.19

(1) Name	SHLOM	DANZ	NZINGER				(2) I.D. Number					
(3) Cover Per	riod 10	, 01	, 23	through	12	, 31	, 23	(4) Page	6	-6	9	

(5) Date	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
12/08/23 41	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
12/10/23 42	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		2.30
12/11/23	Signs.com 1550 South Gladiola Street Salt Lake City, UT 84104	Promotional Material	CAN		488.41
12/17/23 44	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		10.30
12 / 18 /23 45	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.02
12 /21 /23 46	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
12/24/23 47	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		2.46
12/24/23 48	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.30

(1) Name SHLOMO DANZINGER		(2) I.D. Number
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(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
12/24/23 49	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.74
12 / 26 / 23 50	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
12 /26 /23 51	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		2.30
12 /26 /23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
12 / 26 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		2.30
12 /26 /23 54	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
12 /26 /23 55	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.02
12 /26 /23 56	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30

(1) NameS	ameSHLOMO DANZINGER					(2) I.D. Number									
(3) Cover Period	10	/ 01	/ 23	_ through	12	_/_	31	/ 23	(4) F	age	8	of		9	

(5) Date	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
12/26/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.30
12 / 27 / 23	Custom Ink 2910 District Avenue Fairfax, VA 22031	Promotional Material	CAN		784.85
58					
12 / 27/ 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
59					
12 / 27/ 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
60	Now Should, EXTOTIZ				
12 / 27 / 23	Anedot Inc 1340 Poydras Street Suite 1770	Processing Fee	CAN		40.30
61	New Orleans, LA 70112				
12 /27 /23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		7.50
62	New Officialis, EX 70112				
12 / 27/ 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
63	8				
12 /27 /23	Anedot Inc 1340 Poydras Street Suite 1770	Processing Fee	CAN		7.50
64	New Orleans, LA 70112				

(1) Name	SHLOM	DANZ	ZINGER	<u>.</u>					(2) I.D. Num	ber_			
(3) Cover Per	riod 10	/ 01	/ 23	through	12	1	31	/23	(4) Page	9	of	9	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
12 / 28 / 23 65	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
12 /29 /23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
66 12 /29 /23 67	Anedot inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		2.30
12 / 29 / 23	Signs.com 1550 South Gladiola Street Salt Lake City, UT 84104	Promotional Material	CAN		369.02
12 / 31 / 23	Anedot inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
//					
/ /					•
/ /					

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY



	OFFICE USE ONLY
Name	
SHLOMO DANZINGER	
I.D. Number	
Address (number and street) 9000 HARDING AVE	JAN 10 PH 3:44 Smc
City, State, Zip Code SURFSIDE, FL 33154	
☐ CHECK IF ADDRESS HAS CHANGED	
Candidate for:	•
_	
M Mayor	
Commissioner, District	_
☐ Property Appraiser	
☐ Clerk of the Circuit Courts	
☐ Community Council, Area, Sul	o-Area
REPORT IDE	NTIFIERS
Report Name 2023Q4 Cover Period	10/01/2023 through 12/31/2023
Report Type Original Amendment	
CERTIFI	CATION
It is a first degree misdemeanor for any pers	
I certify that I have examined this report and it is true, correct, and complete.	I certify that I have examined this report and it is true, correct, and complete.
SHLOMO DANZINGER	SHLOMO DANZINGER
(Type name)	(Type name) Candidate
X Alhertyn' Signature	X Signature

PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES



This report must be filed by applicable candidates running for Town of Surfside Mayor or Town Commissioner.

(1) Name	SHLOMO DANZINGER			(2) I.D. Number	44
(3) Report	Name 2023Q4	_ (4) Cover Period	10/01/2023	through <u>12/31</u>	/2023
(5) Report	Type 🛭 Original 🔲 Amendmen	nt (6) Page 1		of 1	
(7) Row Number	(8) Full Name (Last, Suffix, First, Middle)	(9) Employed By	Name of Organi	(10) zation Employed By hired by campaign)	(11) Amendment Type
N/A	N/A	N/A	N/A		N/A

	CAMPAIGN TREASURE						
	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	SHLOMO DANZINGER	OFFICE USE ONLY					
(2)	Name 9000 HARDING AVE	JAN 10 PH 3:41					
(2)	Address (number and street)	- Me					
	SURFSIDE, FL 33154						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number:					
(4)	Check appropriate box(es):						
	Candidate Office Sought: MAYOR						
	☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded					
	☐ Party Executive Committee (PTY)	☐ Check here if PTY has disbanded					
	☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)	Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)						
	(5) Report	Identifiers					
Cov	er Period: From 10 / 01 /2023 To	12 / 31 /2023 Report Type: 2023Q4					
 ✓ 0	riginal Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
Casl	h & Checks \$, _31 , 57900	Monetary					
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$ 0.00					
Tota	I Monetary \$, , 0 . 00	,,,					
In-Ki	ind \$, , 0.00	Total Monetary \$, , 0 . 00					
		(8) Other Distributions					
		\$,,					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
(3)	\$, 31, 629 . 00	\$, 3 , 284 . 65					
	·	·					
	(11) Cert It is a first degree misdemeanor for any perso						
Ιd	I certify that I have examined this report and it is true, correct, and complete:						
ſΤ	ype name) SHLOMO DANZINGER	(Type name) SHLOMO DANZINGER					
	Individual (only for IE	☐ Chairperson (only for PC and PTY)					
or	electioneering comm.)	NN 1					
X	Sudantoni	x the Age					
Si	gnature	Signature					

JAN 10 PM 3:41

(1) Name	SHLO	SHLOMO DANZINGER							(2) I.D. Number					
(3) Cover P	eriod	10	/ 01	/23	through	12 /	31	ı 23	(4) Page	1	of 10			
(3) Cover P	erioa	. 10	/ 01	123	unrougn	1Z/	J 1	/ 23	(4) Page	ı	OT IU			

(5) Date	(7) Full Name	(8)		(9)	(10)	(11)	(1 <u>2</u>)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
10, 28 , 23	RyaniSilverman 1958 West Gray St Houston TX 77019	I	Attorney	RCT			1000.00
10, 28 , 23	Roberto Bolona 730 SW 78th Ave Plantation FL 33324	I	Real Estate	RCT			1000.00
11 , 13 , 23	Eli Kagan 250 95th Street Unit 546703 Surfside FL 33154	1	Design	RCT			100.00
11 , 13 ,23	Alexander Rindner 9401 Collins Ave #1203 Surfside FL 33154	I	Investor	RCT			200.00
11, 13 , 23	Jonathan Fish 9232 Abbott Avenue Surfside FL 33154	1	Self	RCT			500.00
11 , 13 ,23 6	Baruch Edelkopf 9341 Collins Ave #202 Surfside, FL 33154	Ι	Real Estate	RCT			100.00
11 ₁ 13 ₁ 23	Shlomo Sam Pessar 9341 Collins Avenue #603 Surfside FL 33154	I	Real Estate	RCT			100.00

DS-DE 13 (Rev. 11/13)

JAN 10 PM 3:42

(1) Name <u>S</u>	HLON	ION	DANZI	NGER		(2) I.D. Number								
(3) Cover Peri	od 1	0	/ 01	123	through	12	1	31	1 23	(A) Page	2	of	10	

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
11 , 14 ,23	Esty Scheiner 9341 Collins Ave. #507 Surfside FL 33154	l	Self	RCT			18.00
11 , 14 , 23	Louis Ezrick 9261 East Bay Harbor Drive #704 Bay Harbor Islands FL 33154	I	Physical Therapist	RCT			100.00
11 , 15 , 23	Shlaime Mochkin 9424 Abbott Ave Surfside FL 33154	1	Self	RCT			50.00
11 , 15 , 23	Josh Gre 9549 Carlyle Ave Surfside FL 33154	I	Consultant	RCT			100.00
11, 20 , 23	David B Karp 9341 Collins Ave #1208 Surfside, FL 33154	Ī	Retired	CHE			100.00
11 / 21 / 23	Daniel Gielchinsky 2875 NE 191st Street Suite 705 Aventura FL 33180	I	Lawyer	RCT			500.00
11 , 22 , 23	Jonathan Rubinstein 9389 Byron Avenue Surfside FL 33154	1	Teacher	RCT			25.00

DS-DE 13 (Rev. 11/13)

(1) Name	SHL	SHLOMO DANZINGER						JAN 10 PM 3:42 (2) I.D. Number						
(3) Cover P	eriod	10	/ 01	/23	through	12	1	31	/ 23	(4) Page	3	of	10	

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	în-kind Description	Amendment	Amount
11 / 25 / 23 15	Dovid Weingot 9595 Collins Ave Apt 508 Surfside FL 33154-2636	1	Self	RCT			1000.00
11 / 25 / 23	Alon Davoudpour 600 94 Street Surfside FL 33154	l	Real Estate	RCT			1000.00
11 <u>26</u> 23	Michael Blisko 9390 Bay Drive Surfside FL 33154	I	Executive	RCT			1000.00
11 / 26 /23 18	Ronit Blisko 9390 Bay Drive Surfside FL 33154	I	Homemaker	RCT	_		1000.00
11 , 26 , 23 19	Shoshana Blisko 9390 Bay Drive Surfside FL 33154	I	Marketing	RCT			1000.00
11 _/ 26 _/ 23 20	Goldie Blisko 9390 Bay Drive Surfside FL 33154	I	Teacher	RCT			1000.00
11 , 26 , 23 21	Sara Blisko 9390 Bay Drive Surfside FL 33154	1	Student	RCT			1000.00

DS-DE 13 (Rev. 11/13)

(1) Name			(2) 1.[JAN 10 PH 3:42 (2) I.D. Number					
(3) Cover Period	10_/	01 / 23	through	12 / 31	/ 23	(4) Page	4	of _10	<u> </u>

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name		(0)	(0)	(10)	('''	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	ln-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
11 / 27 / 23	Deborah Stern 220 Surrey Road Hillside NJ 07205	ı	Homemaker	RCT	•		1000.00
22							
11 _/ 27 _/ 23	Yitzhak Stern 220 Surrey Road Hillside NJ 07205	I	Self	RCT		-	1000.00
11 / 27 / 23	Yisroel Bernstein 531 Brooklyn Avenue Brooklyn NY 11225	ı	Sales	RCT			500.00
24	Joseph Transfer						
11 _/ 27 _/ 23 25	Hillel Mendelovitz 9559 Collins Avenue 903s Surfside FL 33154	I	Retired	RCT			100.00
11 / 28 / 23	Robert Hartman 10155 Collins Ave 810 Bal Harbour FL 33154	ī	Investor	RCT			1000.00
11 / 29 / 23	Eli Levitin 1222 East 22nd St Brooklyn, NY 11210	·I	Lawyer	RCT			1000.00
11 / 30 / 23	Yair Massri 700 92nd Street - Surfside FL 33154	I	Rabbi	RCT			100.00
DC DE 12 (Boy 11)					AND CODE VAL		

DS-DE 13 (Rev. 11/13)

(1)	Name SH	LOMO DANZINGER			JAN 10 PM 3:42 (2) I.D. Number					
(3)	Cover Period	10 / 01 / 23	throu	gh <u>12</u> /	31 / 23	(4) Page		of <u>10</u>		
11	(5) Date (6) Sequence Number / 30 / 23	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Jack Klein 19 Briarwood Lane Suffern, NY 10901	Co Type	(8) ontributor Occupation Self	(9) Contribution Type CHE	(10) In-kind Description	(11) Amendment	(12) Amount 1000.00		
11 30	, 30 ,23	Samuel Rottenstein 9455 Collins Ave #802 Surfside FL 33154	I	Self	CHE			1000.00		
12 31	, 1 , 23	Eric Edidin 9548 Bay Drive Surfside FL 33154	ı	Self	RCT			1000.00		
12 32	, 1 , 23	Iris Herssein 701 94th Street Surfside FL 33154	ī	Attorney	RCT			250.00		
12 33	, 3 , 23	Ariel Mangami 1175 101st Street #2 Bay Harbour Islands FL 33154	I	Retired	RCT			100.00		
12 34	, 4 , 23	Marc Mouhadeb 9108 Abbot Ave Surfside FL 33154	I	Analyst	RCT			50:00		
12 35	, 4 _, 23	Fred Walfish 9273 Collins Ave #312 Surfside FL 33154	I	Self	CHE			1000.00		

DS-DE 13 (Rev. 11/13)

(1)	Name SH	LOMO DANZINGER			 	(2)	JH I.D. Number	 M TO bM 3:	42
(3)	Cover Period	10 / 01 / 23	throu	gh <u>12</u> /	31	/ 23	_ (4) Page	6	of <u>10</u>
12	(5) Date (6) Sequence Number / 4 / 23	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Anna Rose Rottenstein 9455 Collins Ave #802 Surfside FL 33154	Co Type I	ontributor Occupation Homemaker	Conti	(9) ribution ype	(10) In-kind Description	(11)	Amount 500.00
12 37	, 4 _, 23	Herman Simon Goldstein 9455 Collins Ave Surfside FL 33154	I	Self	CHE			-	500.00
12 38	, 5 _, 23	Daniel Shapiro 9364 Bay Drive Surfside FL 33154	I	Retired	RCT				1000.00
12 39	, 5 _/ 23	Bentzion Shemtov 8911 Abbot Ave Surfside FL 33154	I	Self	RCT				100.00
12 40	, 8 , 23	Charles A Scharf 9540 Byron Ave Surfside FL 33154	I	Seif	RCT				1000.00
12 41	, 8 , 23 ,	Mates Roth 9455 Collins Ave #901 Surfside FL 33154	-	Self	RCT				500.00
12 42	, 10 _/ 23	Shea Schneider 8942 Garland Ave Surfside FL 33154	l	Sales					50.00

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JAN 10 PM 3:42

(1) Name SH	LOMO DANZINGER		(2) I.D. Number						
(3) Cover Period	10 / 01 / 23	throu	gh <u>12</u> /	31 / 23	_ (4) Page		of <u>10</u>		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	<u>(</u> 11)	(12)		
Sequence Number	Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount		
12 _/ 15 _/ 23 43	Linden Nelson 924 88th Street Surfside FL 33154	I	Advertising	CHE			1000.00		
12 / 15 / 23 44	Michelle Nelson 924 88th Street Surfside FL 33154	1	Homemaker	CHE			1000.00		
12 _/ 17 _/ 23	Jonah Bardos 9559 Collins Ave Surfside FL 33154	. I	Doctor	RCT			250.00		
12 _/ 18 _/ 23 46	Albert Belecen 9595 Collins Ave N 507 Surfside FL 33154	1	Retired	RCT			18.00		
12 _/ 21 _/ 23	Yossi Yaacov 9424 Bay Drive Surfside FL 33154	I	Self	RCT			1000.00		
12 , 24 , 23 48	Donna Omari 10275 Collins Ave Bal Harbour FL 33154	I	Retired	RCT			54.00		
<u>12 / 24 / 23</u> 49	Dana Messika 9801 Collins Ave #20C Bal Harbour, FL 33154	I	RN	RCT			25.00		

DS-DE 13 (Rev. 11/13)

(1) Name _	SHLO	MO E	DANZIN	GER			(2) I.D. NumbeFAN 10 PM 3:43						
(3) Cover Pe	riod _	10	/ <u>01</u>	/23	through _	12 /	31	/ 23	(4) Page	8	of _	_10_	

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
12 / 24 / 23 50	Naftali Kaplan 9273 Collins Ave #409 Surfside FL 33154	1	IΤ	RCT			36.00
12 _/ 26 _/ 23 51	Moshe Lew 1149 97th Street Bay Harbour Islands FL 33154	 	Web Developer	RCT			100.00
12 / 26 / 23 52	Eli Bryski 1143 97th Street Bay Harbour Islands FL 33154	I	Student	RCT	-		50.00
12 _/ 26 _/ 23 53	Gabriel Ammar 924 93rd Street Surfside FL 33154	I	Self	RCT			500.00
12 <u>/ 26 / 23</u> 54	Aron Zanger 9559 Collins Ave Surfside FL 33154	I	Self	RCT			50.00
12 / 26 / 23 55	David Herman 9595 Collins Ave #209 Surfside FL 33154	I	CEO	RCT			100.00
12 _/ 26 _/ 23 56	Avrohom Chayempour 21094 Las Brisas Circle Boca Raton FL 33433	I	Teacher	RCT			18.00

DS-DE 13 (Rev. 11/13)

JAN 10 PM 3:43

(1) Name SH	LOMO DANZINGER			(2)	I.D. Number		
(3) Cover Period	10 / 01 / 23	throu	gh <u>12</u> /	<u>31</u> / <u>23</u>	_ (4) Page	9	of <u>10</u>
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Magdalena Charme 9595 Collins Ave #408 Bal Harbour FL 33154	Co Type	(8) ontributor Occupation Doctor	(9) Contribution Type RCT	(10) In-kind Description	(11)	(12) Amount 500.00
12 , 26 , 23 58	Aryeh Schottenstein 9559 Collins Ave #205S Surfside FL 33154	I	Self	RCT			25.00
12 / 27 / 23 59	Steven B Schwartz 9595 Collins Ave #404 Surfside FL 33154	I	Retired	RCT	_		500.00
12 _/ 27 _/ 23 60	Walter Molofsky 9459 Collins Ave Surfside FL 33154	1	MD	RCT			100.00
12 _/ 27 _/ 23 61	Roy Raskin 824 88th Street Surfside FL 33154	_	Architecture	RCT			1000.00
12 _/ 27 _/ 23	Paul Kruss 2600 East Island Blvd #702 Aventura FL 33160	-	Self	RCT			180.00
12 _/ 27 _/ 23	Ronald Glass 9401 Collins Ave #1205 Surfside FL 33154	ı	Retired	RCT			100.00

DS-DE 13 (Rev. 11/13)

(1) Name SHI	LOMO DANZINGER			(2)	I.D. Number	N 10 PM 3:4	13
(3) Cover Period	10 / 01 / 23	throu	gh <u>12</u> /	31_ / 23	_ (4) Page		of <u>10</u>
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	(8) ontributor Occupation	(9) Contribution Type	(10) în-kind Description	(11)	(12)
12 / 27 / 23 64	Morris Tuchman 9401 Collins Ave Surfside FL 33154	1	Attorney	RCT			180.00
12 _/ 28 _/ 23 65	Edward Safdie 9499 Collins Ave Surfside FL 33154	ı	Retired	RCT			500.00
12 _/ 29 _/ 23	Mario Loyola 8959 Carlyle Ave Surfside FL 33154	I	Self	RCT			500.00
12 _/ 29 _/ 23 67	Amold Christmas 9156 Collins Ave #309 Surfside FL 33154	1	Retired	RCT			50.00
12 _/ 31 _/ 23 68	Jerry Freund 9156 Collins Ave #210 Surfside FL 33154	I	Executive	RCT			100.00
<i>I</i>							
1 1							

DS-DE 13 (Rev. 11/13)

(1) Name SHLOMO D	ANZING	ER	(2) I.D. Number					
(3) Cover Period 10	_/ 01	_/ 23	through 12	/31	_/ 23	(4) Page 1	of ⁹	

(5) Date	(7)	(8)	(9)	(10)	(11)	
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount	
10 /28/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30	
10 /28/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30	
11 /02/23 3	Constant Contact 1601 Trapelo Road Suite 329 Waltham, MA 02451	Digital Marketing	CAN		396.00	
11 /06/23	Wix.com 2601 Mission St. Suite 300 San Francisco, CA 94110	Web Hosting	CAN		162.00	
11 /13/23 5	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30	
11 /13/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		8.30	
11 /13/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30	
11 /13/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30	

JAN 10 PH 3:43

(1) Name SHL	OMO DANZII	NGER				(2) I.D. Number		
(3) Cover Period	10 /01	_/ 23	through 12	, 31	, 23	(4) Page ²	of ⁹	

(5) Date	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
11 /13 / 323	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
11 /14/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.02
10					
11 /14/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
11			·		
11 /15/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		2.30
12					
11 /20/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
13					
11 /20/23	Town of Surfside 9293 Harding Ave Surfside FL 33154	Filing Fee	CAN		25.00
14					
11 /21/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
15					
11 /22/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.30
16					

(1) Name SHLOM	O DAN	<u>IZINGE</u>	<u>R</u>					(2) I.D. Nu	mber		
(3) Cover Period	10	<i>j</i> 01 <i>i</i>	/23	through 12	2 /	31	/23	(4) Page	3	of	9

(5)	(7)	(8)	(9)	(10)	(11)	
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount	
11/24/23	CVS 9578 Harding Ave Surfside, FL 33154	Postage & Shipping	CAN		4.92	
17				1		
11 /24 / 23	United States Postal Service 250 95th Street Surfside, FL 33154	Postage & Shipping	CAN		26.40	
18						
11 / 25 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30	
19						
11 /25/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30	
20				:		
11 / 26/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN ·		40.30	
21						
11/26/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30	
22						
11 / 26 /23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30	
23	-					
11/26/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30	
24						

(1) Name _	SHLOMO I	DANZIN	IGER	<u> </u>				(2) I.D. Number_			
(3) Cover F	Period 10	/01	<i>p</i> 23	through 1	2	/ 31	/23	(4) Page 4	of	9	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
11/26/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
11 /27 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
11 / 27 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
11 /27 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
11 /27 /23 29	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
11/28/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
11/29/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
11/30/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30

(1) Name _	SHLOMO	DANZI	NGER_					 (2) I.D. Nur	nber			
(3) Cover P	eriod_ 10	/ 01	/ 23	through	12	/ 31	_/ 23	(4) Page	5	of	9	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
12/01/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
12/01/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		10.30
12 / 03 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
12 /04 /23	Google Suites 1600 Amphitheatre Pkwy Mountain View, CA 94043	Email Domain	CAN		12.00
12 /04 /23 37	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		2.30
12 / 05 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
12 / 05 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
12 / 08/ 23 40	Starbucks 9560 Harding Ave Surfside, FL 33154	Campaign Supplies	CAN		19.19

(1) Name	SHLOM	DANZ	INGER					(2) I.D. Nur	nber			
(3) Cover Per	riod 10	, 01	, 23	through	12	, 31	, 23	(4) Page	6	-6	9	

(5) Date	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
12/08/23 41	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
12/10/23 42	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		2.30
12/11/23	Signs.com 1550 South Gladiola Street Salt Lake City, UT 84104	Promotional Material	CAN		488.41
12/17/23 44	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		10.30
12 / 18 /23 45	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.02
12 /21 /23 46	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
12/24/23 47	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		2.46
12/24/23 48	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.30

(1) Name SHLOMO DANZINGER		(2) I.D. Number
(3) Cover Period 10 / 01 /23	through _12	(4) Page ⁷ of ⁹

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
12/24/23 49	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.74
12 / 26 / 23 50	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
12 /26 /23 51	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		2.30
12 /26 /23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
12 / 26 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		2.30
12 /26 /23 54	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
12 /26 /23 55	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.02
12 /26 /23 56	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30

(1) NameS	HLOM	O DAN	IZINGE	₹					_ (2) I	D. Nun	nber			
(3) Cover Period	10	/ 01	/ 23	_ through	12	_/_	31	/ 23	(4) F	age	8	of	9	

(5) Date	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
12/26/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.30
12 / 27 / 23	Custom Ink 2910 District Avenue Fairfax, VA 22031	Promotional Material	CAN		784.85
58					
12 / 27/ 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
59					
12 / 27/ 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
60	Now Should, EXTOTIZ				
12 / 27 / 23	Anedot Inc 1340 Poydras Street Suite 1770	Processing Fee	CAN		40.30
61	New Orleans, LA 70112				
12 /27 /23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		7.50
62	New Officialis, EX 70112				
12 / 27/ 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
63	8				
12 /27 /23	Anedot Inc 1340 Poydras Street Suite 1770	Processing Fee	CAN		7.50
64	New Orleans, LA 70112				

(1) Name	SHLOM	DANZ	ZINGER	<u> </u>					(2) I.D. Num	ber_			
(3) Cover Per	riod 10	/ 01	/ 23	through	12	1	31	/23	(4) Page	9	of	9	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
12 / 28 / 23 65	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
12 /29 /23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
66 12 /29 /23 67	Anedot inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		2.30
12 / 29 / 23	Signs.com 1550 South Gladiola Street Salt Lake City, UT 84104	Promotional Material	CAN		369.02
12 / 31 / 23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30
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/ /					•
/ /					

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY



	OFFICE USE ONLY
Name	
SHLOMO DANZINGER	
I.D. Number	
Address (number and street) 9000 HARDING AVE	JAN 10 PH 3:44 Smc
City, State, Zip Code SURFSIDE, FL 33154	
☐ CHECK IF ADDRESS HAS CHANGED	
Candidate for:	•
_	
M Mayor	
☐ Commissioner, District	_
☐ Property Appraiser	
☐ Clerk of the Circuit Courts	
☐ Community Council, Area, Sul	o-Area
REPORT IDE	NTIFIERS
Report Name 2023Q4 Cover Period	10/01/2023 through 12/31/2023
Report Type Original Amendment	
CERTIFI	CATION
It is a first degree misdemeanor for any pers	
I certify that I have examined this report and it is true, correct, and complete.	I certify that I have examined this report and it is true, correct, and complete.
SHLOMO DANZINGER	SHLOMO DANZINGER
(Type name)	(Type name) Candidate
X Alhertyn' Signature	X Signature

PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES



This report must be filed by applicable candidates running for Town of Surfside Mayor or Town Commissioner.

(1) Name	SHLOMO DANZINGER			JAN 10 PM 3:	QQ.
(3) Report	Name 2023Q4	_ (4) Cover Period	10/01/2023	through _12/31	/2023
(5) Report	Type 🛭 Original 🔲 Amendmer	nt (6) Page 1		of 1	
(7) Row Number	(8) Full Name (Last, Suffix, First, Middle)	(9) Employed By	Name of Organization	10) ation Employed By ired by campaign)	(11) Amendment Type
N/A	N/A	N/A	N/A		N/A

	CAMPAIGN TREASURE	'S REPORT SUMMAR	RY						
(1)	SHLOMO DANZINGER	OFFICE	USE ONLY						
(2)	Name 9000 HARDING AVE								
(2)	Address (number and street)		AN 19 PM 2:11						
	SURFSIDE, FL 33154		Gmar.						
	City, State, Zip Code)mC						
	Check here if address has changed	(3) ID Number:							
(4)	✓ Candidate Office Sought: MAYOR ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Check here if PTY has disbanded ☐ Check here if PTY has disbanded								
	individual making electioneering communications)	Check here if no other IE or E	o reports will be filled						
	(5) Report	lentifiers							
Cove	er Period: From <u>01</u> / <u>01</u> / <u>24</u> To	01 / 12 / 24 R	eport Type: 202460DP						
 ✓ 0	riginal Amendment Spe	al Election Report							
(6)	Contributions This Report	7) Expenditures This Re	eport						
Casl	n & Checks \$,3 , <u>013</u> . <u>00</u>	Monetary Expenditures \$,	, <u>416</u> . <u>24</u>						
Loar	s \$,, _0.00	Transfers to Office Account \$,	, 0.00						
Tota	I Monetary \$, , 0 . 00								
In-Ki	ind \$,, _0.00	otal Monetary \$, _	,0 . 00						
		8) Other Distributions							
		\$, ,							
(9)	TOTAL Monetary Contributions To Date \$,34_, _64200	10) TOTAL Monetary Exp							
	(11) Cert It is a first degree misdemeanor for any pers		830 13 ES \						
Ιc	ertify that I have examined this report and it is true, corre		033.13, 1 .3.,						
	ype name) SHLOMO DANZINGER	(Type name) SHLOMO I	DANZINGER						
	Individual (only for IE Treasurer Deputy Treasurer electioneering comme)		person (only for PC and PTY)						
Х	M.l. Shi	x Ml. Ai							
	gnature	Signature							

(1) Name SHLOMO DAN	ZINGER					(2) I.D. Number_		
(3) Cover Period 01	, 01	,24	through 01	,12	, 24	(4) Page 1	af 3	

(5)	(7)	(8)	(9)	(10)	(11)	
(6) Sequence Number	Full Name Purpose (Last, Suffix, First, Middle) (add office sough Street Address & contribution to City, State, Zip Code candidate)		Expenditure Type	Amendment	Amount	
01 / 02 /24	Google Suites 1600 Amphitheatre Pkwy Mountain View, CA 94043	Email Domain	CAN		12.00	
1	5					
01/04/24	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.02	
2	u u					
01 / 04 /24	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30	
3	,					
01 /04/24	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		4.30	
4						
01 /04/24	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.74	
5						
01 /04 /24	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30	
6	P					
01 /04 / 24	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.02	
7						
01/ 04/24	Anedot Inc 1340 Poydras Street Suite 1770	Processing Fee	CAN		1.02	
8	New Orleans, LA 70112					

JAN 19 PM 2:11 5mc

(1) Name	SHLOMO DA	NZINGER			(2) I.D. N	(2) I.D. Number		
			0.4	 112211211		-	122	

(3) Cover Period _	01 / 01	/ 24	through	01 / 12	, 24	(4) Page	2	of 3
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(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
01/04/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.02
01 /05 /23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		2.10
01 /05 /23	CVS 9578 Harding Ave Surfside, FL 33154	Postage & Shipping	CAN		10.04
01 /05 /23	United States Postal Service 250 95th Street Surfside, FL 33154	Postage & Shipping	CAN		39.60
01/07/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		1.30
01 / 07/23	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		20.30
01 / 07/24 15	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		40.30
01/08/24	Tziyona Gheblinkian 9234 Carlyle Ave Surfside FL 33154	Labor	CAN		225.00

JAN 19 PM 2:11

(1) Name_	(1) Name SHLOMO DANZINGER						(2) I.D. Nun			
(3) Cover P	eriod	01 <i> </i> 0	1 / 24	through _	01 / 12	/ 24	(4) Page	3	of 3	

(5)	(7).	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	
01/08/24	Anedot Inc 1340 Poydras Street Suite 1770 New Orleans, LA 70112	Processing Fee	CAN		10.30
01/08/24	Starbucks 9560 Harding Ave Surfside, FL 33154	Campaign Supplies	CAN		20.58
18					
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/ /					
/ /					
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

JAN 19 PM 2:11 Gre

(1) Nan	ne SHLOMO DANZINGER	(2) I.D. Number

(3) Cover Period 01 / 01 / 24 through 01 / 12 / 24 (4) Page 1 of 2

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
01 _/ 02 _/ 24 1	Richard Lichter 9001 Collins Ave Surfside FL33154	ı	Financial Planning	CHE			250.00
01 , 04 , 24	Yaakov Lee 1001 Cambridge A Deerfield Beach FL 33442	L	Retired	RCT			18.00
01 , 04 , 24	Levi Edelkopf 1150 102nd Street Bay Harbor Islands FL 33154	1	Sales	RCT			100.00
01 , 04 , 24 4	Robert Indig 2 White Dove Court Lakewood, NJ 08701	ı	Real Estate	RCT			100.00
01 , 04 ,24 5	Jeffrey Kaufman 7000 Corning Cir Boynton Beach FL 33437	l	Office	RCT			36.00
01, 04,24	Milton Frank 9595 Collins Ave Bal Harbour, FL 33154	1	Retired	RCT			500.00
01 , 04 , 24 7	Solomon Brachfeld 1865 54th Street Brooklyn, NY 11204	I	Sales	RCT			18.00
DS-DE 13 (Rev. 11/1	10)	0FF DF	VEDOE FOR I	NOTOLICTIONIC	AND CODE VAL		

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

JAN 19 PM 2:11 Spe

(1)	Name	SHLOMO DANZINGE	R
,		OTTEOTHO DI HITCH	۱

(2) I.D. Number

(3) Cover Period 01 / 01 / 24 through 01 / 12 / 24 (4) Page 2 of 2

(5)	(7)	(8)		(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Type	Occupation	Туре	Description	Amendment	Amount
01 , 04 , 24	Gregory Aubrey 34 Shepherds Dr Scarsdale, NY 10583	1	E-Commerce	RCT			18.00
8							
01 / 04 / 24	Reuven Nathanson 132 Mansfield Ave Los Angeles, CA 90036	I	Rabbi	RCT			18.00
01 , 05 , 24	Isaac Salver 9751 East Bay Harbor Drive Bay Harbor Islands, FL 33154	I	СРА	RCT			180.00
01 / 07 / 24	Jacqueline Feldman 3605 Murano Drive Hollywood, FL 33021	1	Analyst	RCT			25.00
01 , 07 , 24	Shelley Rindner 9401 Collins Avenue Surfside, FL 33154	I	Real Estate	RCT			500.00
01 , 07 , 24	Robert Lowinger 801 89th Street Surfside, FL 33154	I	Investment Manager	RCT			1,000.00
01, 08, 24	Leon Goldenberg 1360 E 14th Street Brooklyn NY 11230	I	CEO	RCT			250.00

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY



	OFFICE USE ONLY						
Name							
SHLOMO DANZINGER	 						
I.D. Number							
	JAN 19 PM 2:11						
Address (number and street)	Still ISPM Z. I.I.						
9000 HARDING AVE	Cmc						
City, State, Zip Code SURFSIDE, FL 33154							
☐ CHECK IF ADDRESS HAS CHANGED							
Candidate for:							
⊠ Mayor							
☐ Commissioner, District							
☐ Property Appraiser							
☐ Clerk of the Circuit Courts							
☐ Community Council, Area, Su	ub-Area						
REPORT IDE	REPORT IDENTIFIERS						
Report Name 202460DP Cover Period	Report Name 202460DP Cover Period 01/01/2024 through 01/12/2024						
Report Type Original							
CERTIF	CICATION						
	son to falsify a public record (ss. 839.13, F.S.)						
I certify that I have examined this report and it is true, correct, and complete.	I certify that I have examined this report and it is true, correct, and complete.						
SHLOMO DANZINGER	SHLOMO DANZINGER						
(Type name)	(Type name)						
X Signature	X Signature						
3.12.12	- gridian						

PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES



This report must be filed by applicable candidates running for Town of Surfside Mayor or Town Commissioner.

(1) Name	SHLOMO DAN	IZINGER	JAN 19 PM 2:12 W (2) I.D. Number				
(3) Report Name <u>202460DP</u>			(4) Cover Period	01/01/2024	through 01/12/2024		
(5) Report	Type 🛭 Original	☐ Amendment	t (6) Page 1		of		
(7) Row Number	(8) Full Na (Last, Suffix, F	ame	(9) Employed By	Name of Organ	(10) ization Employed By hired by campaign)	(11) Amendment Type	
N/A	N/A		N/A	N/A		N/A	
		6					
					_		